FOR INSTRUCTIONS, SEE BACK OF FORM

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

AH 8: 43 Parties must be filed electronically. FAXED PM X 7 1 12 1 0 2 1 3 2 COMMITTEE NAME (Must be same as on Statement of Organization) Statehouse FORM IMPORTANT: Indicate by # type of committee you are reporting for: DR-2 (1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party (4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political DISCLOSURE (Rev. 12/2009) REPORT Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (For Office Use Only 11) Local Ballot Issue Comm. # CANDIDATE COMMITTEES ONLY: Candidate Name Logged In. Political Party (if applicable) Sarad Klein Scanned Kepublican Computer Office Sought District (if Senate or House) Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) and 68A,401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. 515-689-0353 SIGNATURE OF PERSON FILING REPORT DATE SIGNED REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. Indicate by # 2 ☐CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election ☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.) County & Local Committees, enter County In which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)\$ ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule F: Loans Received total (Attach Schedule F)..... Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) SUB-TOTAL..... SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...... Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must be zero)\$ **UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)......\$ CONSULTANT BREAKDOWN (Schedule G Attached?) YE\$ CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form	BEST STATE	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	1.088 Sept. 18 2 . P.C.	A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)			CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IDWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE; ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RÉCEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
11/3/10	ID#	Washington County Republican Women Washington IA 52353		\$ 50,00	INCOME
11/3/10	ID#	Harold and Berry DeBoef 10972 170th St 50268		100.00	
11/3/10	ID#	Long Plumbing : Htg i Ret 154 Joy Ave Rubin JA 52585		30.00	
11/12/10	ID# CK#	Victory Energrises 5200 O.S.W. 30+4 St Davendort IA 52802	· · · · · · · · · · · · · · · · · · ·	47.00	
11/12/10	ID# CK#	Doug Yansky 4224 Yverre Street Sw Inwa City IA 52240		300.00	
12/21/10	ID# 6052 CK#	Independent Insurance Agents of To 400 Westown Parkway Ste 200 West Des Moines IX 50266	wa	100.00	
12/21/16	ID# 6059 CK#	Jowa Committee of Automotive retails IIII office Park Rd west Des Moines IA 50265	ers	100.00	
12/21/10	ID# 6067 CK#	Jowa Health PAC 1775 90th 6t West Des Moines IA 50266		250.00	
12/21/10	CK# 6118	Towa Optometric Association PAC 6150 Village View Dr Ste 105 west Des Moines IA 50266		100.00	
12/21/10	ID# 6400 CK#	Iowa Restaurant Association 85 25 Douglas Suite 47 Des Moines IA 50322		150,00	
		THE TOTAL TOTAL	SUB-TOTAL	\$1227.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2 (for Schedule A)

TOTAL (if last page of this schedule)

For Instructions, See Back of Form			
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	1000年9月1日	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CHEC AME	CK THIS BOX IF NDING FORM

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FO FUND- RAISEF
12/21/10	CK#	Folward Hahn 1444 200th St		\$ 15.00	INCOM
12/28/10	ID#	Kenta IA SAZYE Wellfac PO Box 9937	 	250.00	
12/28/10	ID# 1705 CK#	Lincolnucy Energy PAC 59511 W Lincoln Hory		200,00	
2/28/10	ID# 1705 CK#	Towa Renewable Fuels Association (5505 NW 8604 Street #100	Ac	250.00	
12/28/10	ID# 1705 CK#	Johnston Iowa Sol3] Midwest Grain Processois PAC 1660 428th St		200.00	
2/28/10	ID# 9726 ск#	Golden Grain Energy PAC 1822 43rd St SW		200,00	
3/28/10	ID# CK#	Mason Ciry IA S0401 Absolute Energy PAC 1372 Store Line Prood St Ansaper IA 50472		200.00	
128/10].	Monsand Citizenship Rund 800 N Lindbergh Blud St Lovis MO 63167		500.00	
	ID#	St Lovis MO 63167			
	ID#				
	CK#		1][
			SUB-TOTAL	1815.00	

TOTAL (if last page of this schedule)

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguintly (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

		_		-
12	6775	7000		-
130	17.7		177.73	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAG COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAG CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

MONETARY EXPENDITURES
CK THIS BOX IF

COMMITTE	E NAME (Must be	same as on Statement of Organization)			
L KI	ein For Soc	utehouse			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOS (DESCRIBE TRAN		AMOUNT EXPENDED
11/1/10	ID# CK#	washington (ounty Auditor 222 West Main Street washington TA 52353	Voter Lists		\$ 26.00
11/2/10	ID# CK#	washington IA 52353 eiceshington (ourry Avolutor 222 west Main Street Washington IA 52353	Voter Lists		14.50
	ID# CK#	17 0 400.5			
	ID# CK#				
	ID# CK#				
	ID#				
	CK#				
	CK#				
				SUB-TOTAL	\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and lowa Code 68A.402(3)(i).)

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Page	<u> </u>	of	+	

TOTAL (if last page of this schedule)

40.50

FOR INSTRUCTIONS, SEE BACK OF FORM	SCHEDULE	l .
COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 06/97)	IN-KIND CONTRIBUTIONS
Klein tor Statehouse		K THIS BOX IF DING FORM

DATE		RELATIONSHIP	DESCRIPTION	ESTIMATED	√ IF FOR
RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	TO CANDIDATE	OF IN KIND CONTRIBUTION	FAIR MARKET	FUND-RAISER CONTRIBUTION
10/30/11	Ioma Farm Bureau Feberation PAC 5400 University Ave West Des Moines IA 50266		Mailing Expenses	\$ 3,263.69	
11/2/10	Jona Farm Bureau Feberasian PAC 5400 University Aul west Des Moines IA 50266 Luashington County Central Committee 2453 Kibli Aue Washington IA 52353	e .	Newspaper Point Ads	184.93	
	0				
SUB-TOTAL TOTAL (if last page of this schedule)					

"Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1